

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A93000000445

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

**Entity Name:** KNIGHT AGRICULTURE, LLLP

**Current Principal Place of Business:**

205 S.W. 1ST STREET  
BELLE GLADE, FL 33430

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 730  
BELLE GLADE, FL 33430

**New Mailing Address:**

**FEI Number:** 65-0404773

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

NOWICKI, MARK J ESQUIRE  
480 MAPLEWOOD DRIVE  
SUITE 2  
JUPITER, FL 33458 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: KNIGHT, SAMUEL N., JR. TRUSTEE  
Address: 5603 PENNOCK POINT ROAD  
City-St-Zip: JUPITER, FL 33458

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: KNIGHT, RAMONA A TRUSTEE  
Address: 5603 PENNOCK POINT ROAD  
City-St-Zip: JUPITER, FL 33458

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

**SIGNATURE:** SAMUEL N. KNIGHT, JR.

T

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date